

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 8/30/2011
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1.0	PHA Information PHA Name: <u>Logan County Metropolitan Housing Authority</u> PHA Code: <u>OH072</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>01/01/2012</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>100</u> Number of HCV units: <u>296</u>					
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
	PHA 1:				PH	HCV
	PHA 2:					
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years:					
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.					
6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions.					
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable. The Authority has operated the Section 8 Homeownership program since 2002 and currently has 16 families in this program. Five families have went on to be able to pay their mortgage without assistance through the Authority. The Authority continues to promote the Homeownership program despite the economic downturn.					
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.					
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing.					
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.					
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.					
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. See Attachment B					

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <p>See Attachment C</p>
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>We continue to be the housing of choice for program eligible families. We continue to have a strong FSS program with homeownership a priority where possible. Public Housing vacancies were lowered and unit turn-around time has significantly improved.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>Significant Amendment would be a HUD mandated change to the plans. Substantial deviation or modification would be for an unexpected drop or loss of funding.</p>
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only)</p>

ATTACHMENT B
HOUSING NEEDS (Section 9.0)

1. Logan Metropolitan Housing Authority has determined the housing needs for low and very-low income families (including families with disabilities and elderly families) within its jurisdiction, the surrounding area and on the waiting list are as follows:

- a. Decent, safe, and sanitary and affordable housing
- b. Housing for working families within a reasonable proximity to their place of employment
- c. Housing for low and very-low income families in close proximity to schools, child-care, health-care, their families, etc.

2. Logan MHA's current Waiting List:

Bedroom Size	Section 8 Voucher	Public Housing
One Bedroom	159	na
Two Bedroom	185	na
Three Bedroom	96	31
Four Bedroom	80	33
Five Bedroom	1	na
Total Applicants	521	64

3. Family member characteristics

Category	Section 8 Voucher	Public Housing
Female Head of Household	417	53
Male Head of Household	104	11
Elderly	28	0
Non-Elderly	493	64
Disabled	50	2
White	472	64
Black	38	5
Amer. Ind.	6	0

4. Waiting List Income Data: Avg. median income of applicants: \$8,440

Source of Household Income	Section 8 Voucher	Public Housing
Child Support	.14%	.25%
General Assistance	.11%	.16%
Military Pay	0%	0%
Other Non-Wage	.02%	.03%
Wage	.21%	.25%
Pension	.02%	0%
Social Security	.12%	.01%
SSI	.26%	.22%
TANF	.04%	.06%
Unemployment Benefits	.04%	.19%

5. Number of Household Members with Income Source:

Source of Income	Section 8 Voucher	Public Housing
Child Support	74	16
General Assistance	58	10
Military Pay	0	0
Other Non-Wage	10	2
Wage	109	16
Pension	8	0
Social Security	60	1
SSI	136	4
TANF	22	4
Unemployment Benefits	20	4

6. Current Housing Stock

100 Three and Four Bedroom Scattered site single family units, located in Bellefontaine Quincy & DeGraff.

Background Information:

Logan County Metropolitan Housing Authority serves the geographic boundaries of Logan County, Ohio which located about 60 miles Northwest of Columbus, Ohio. This is a mostly rural community with limited housing stock.

Information contained in this section was obtained from Census Data and ODOD County Profiles.

Economy:

Logan County's unemployment has continued to run higher than the National Average as the major employment is manufacturing jobs. The current rate of unemployment for Logan County is 9.6% with a negative job rate growth rate of -2.24% compared with the national average of unemployment at 9.10%. The mean travel time to work, worker age 16+, 2005- 2009 was 21.6 minutes.

Demographic Data:

Logan County has a total population of 46,582, (45% urban, 55% rural)

Racial breakdown as follows:

White, Non-Hispanic – 94.8%

Two or more races – 2.0%

Black, Non-Hispanic – 1.3%

Hispanic or Latino – 0.9%

Asian – 0.7%

Veterans living in Logan County: (2005 – 2009) 4,158.

Income Characteristics:

14.0% of the residents are living in poverty

9.3% of the population had income below the poverty level in 2009.

11.7% of families have income of less than 15k per year.

Logan County has 18,323 households with a median area income of \$45,756 (2009)

Housing Profile:

There are 23,181 total housing units in Logan County. The census states that 78.1% are occupied. The census continues to state of the 78.1% occupied, 73% are owner occupied.

The median gross rent is \$470.

Median monthly housing costs for homes & condos with mortgage: \$1,177

Median monthly housing costs for units without mortgage: \$360

Median Monthly housing cost for renters: \$640

46% percent of the renters spent at least 30% or more of their household income on housing.

Logan County Metropolitan Housing Authority owns 100 public housing units that are 3 & 4 bedroom single family scattered sites, located in Bellefontaine, Quincy & DeGraff. Logan MHA also administers the Section 8 Housing Choice Voucher program with 296 vouchers and 304 vouchers are currently being utilized. Logan MHA also has the Section 8 Homeownership Program in which there are currently 16 families being assisted with buying their homes.

Logan MHA has recently partnered with Logan Belle Home And Neighborhood Development (Logan Belle HAND) to manage & maintain their 12 units of supportive housing: 4 – Two bedroom units located on Seymour St, in Bellefontaine and 8 - One bedroom units located on Brown St, in Bellefontaine. Logan MHA also manages & maintains three open market rental units for Logan Belle HAND. Two are located in Bellefontaine and One in Lakeview.

Logan MHA is in the process of partnering with Bellefontaine Housing Partners to manage 40 units of elderly housing (Bellefontaine Manor) located in Bellefontaine. This is the first time Logan MHA will be working with Tax Credit Units.

Logan MHA is also partnering with Logan Belle Hand to build and manage a Domestic Violence Shelter which will contain 3-Bedroom, 2 Bedroom & 1- Bedroom units, (Wright Place). This shelter is designed to offer families transitional housing for one year, giving the families time to work on getting back on their feet. Partnerships will be developed with other agencies to ensure success for the families.

Logan MHA is continually looking for different ways to offer safe, decent, affordable housing to the residents of Logan County.

Social Characteristics:

Logan County has a population of 45,858, individuals 65 years and over count for 14.7% of the total population. Persons under 5 years are 6.6%, Persons under 18 years are 25.3%. Leaving persons age 19 through 64 years at 53.4%. 86.0% of persons age 25+ are high school graduates. 13.6% of persons age 25+ have a Bachelor's degree or higher.

In 2005-2009, 85 percent of the people at least one year old living in Logan County were living in the same residence one year earlier; 10 percent had moved during the past year from another residence in the same county, 3 percent from another county in the same state, 1 percent from another state, and less than 0.5 percent from abroad.

NATIVITY AND LANGUAGE: One percent of the people living in Logan County in 2005-2009 were foreign born. Ninety-nine percent was native, including 83 percent who were born in Ohio.

Among people at least five years old living in Logan County in 2005-2009, 3 percent spoke a language other than English at home. Of those speaking a language other than English at home, 28 percent spoke Spanish and 72 percent spoke some other language; 35 percent reported that they did not speak English "very well."

ATTACHMENT C

Section 9.1 Strategy for addressing housing needs:

The LCMHA has set the following goals & objectives as a strategy for addressing housing needs:

1. Increase the availability of decent, safe, and affordable housing.
 - a. Apply for additional rental vouchers
 - b. Reduce public housing vacancies - LCMHA has reduced the number of vacancies by 50% over the past 5 years.
 - c. Leverage private or other public funds to create additional housing opportunities.
 - d. Acquire or build units or developments.
2. Improve the quality of assisted housing.
 - a. Improve public housing management score.
 - b. Maintain full occupancy in public housing,
 - c. Continue to renovate/modernize public housing units.
3. Increase assisted housing choices. Provide voucher mobility counseling. This is now being done during orientation and at annual re-certifications.
4. Conduct outreach to potential voucher landlords:
 - a. Landlord packets are distributed informing perspective landlords how the Housing Choice Voucher Programs works.
5. Continue to promote the homeownership program.
6. Promote self-sufficiency of families and individuals.
 - a. Increase the number of employed persons in assisted families.
 - b. Attract supportive services to improve assistance recipients' employability.
 - c. Continue to offer programs to promote self sufficiency.
 1. Family Self Sufficiency

2. Individual Development Accounts

3. Homeownership

4. Post Purchase Homeownership

7. To inform Public Housing and Housing Choice Voucher participants as well as landlords about the Violence against Women Act.

Staff will work in partnership with local agencies such as the Logan County Domestic Violence Coalition and New Directions. Every effort will be made to assist the victims and their families by adhering to the law & notification of victim rights through various media sources. The Logan Metropolitan Housing Authority (LMHA) has adopted a policy (the “LMHA VAWA Policy”) to implement applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) (VAWA). LMHA’s goals, objectives and policies to enable LMHA to serve the needs of child and adult victims of domestic violence, dating violence and stalking, as defined in VAWA, are stated in the LMHA VAWA Policy. In addition, LMHA shall operate programs to serve the needs of child and adult victims of domestic violence, dating violence and stalking as and to the extent such programs are described from time to time in LMHA’s Annual Public Housing Agency Plan.

Public Housing Agency Plan Provision
LOGAN METROPOLITAN HOUSING AUTHORITY (LMHA)

The Logan Metropolitan Housing Authority (LMHA) has adopted a policy (the "LMHA VAWA Policy") to implement applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) (VAWA). LMHA's goals, objectives and policies to enable LMHA to serve the needs of child and adult victims of domestic violence, dating violence and stalking, as defined in VAWA, are stated in the LMHA VAWA Policy. In addition, LMHA shall operate programs to serve the needs of child and adult victims of domestic violence, dating violence and stalking as and to the extent such programs are described from time to time in LMHA's Annual Public Housing Agency Plan.

RESIDENT ADVISORY BOARD RESPONSE:

The Logan Metropolitan Housing Authority (LMHA) has been unsuccessful in getting tenants to be on an Advisory Board. However, all tenants have been made aware Annual/five year plans are available upon request to review and comment on. Tenants have not had any response to the plans.

Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Civil Rights Certification**Annual Certification and Board Resolution**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:


The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Logan Metropolitan Housing Authority

OH072010104

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	
Name of Authorized Official	Mr. Richard Horn
Title	Board Chairman
Signature	
Date	Oct 13, 2011

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 3/31/2014

Part I: Summary		Grant Type and Number		FFY of Grant: 2010 FFY of Grant Approval:	
PHA Name: Logan County Metropolitan Housing Authority		Capital Fund Program Grant No: OH16P07250110 Replacement Housing Factor Grant No: Date of CFFP:			
Type of Grant <input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 6/30/2011					
<input checked="" type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Original	Revised ²	Obligated	Total Actual Cost ¹ Expended
1	Total non-CFP Funds				
3	1406 Operations (may not exceed 20% of line 21) ³	18,453.00	18,453.00	18,453.00	18,453.00
4	1408 Management Improvements				
5	1410 Administration (may not exceed 10% of line 21)	18,453.00	18,453.00	15,169.00	0.00
6	1411 Audit				
7	1415 Liquidated Damages				
8	1430 Fees and Costs				
9	1440 Site Acquisition				
10	1450 Site Improvement	10,000.00	15,836.30	15,836.30	0.00
11	1460 Dwelling Structures	134,622.00	127,286.70	59,678.26	0.00
12	1465.1 Dwelling Equipment—Nonexpendable	3,000.00	4,300.00	3,298.84	0.00
13	1470 Non-dwelling Structures				
14	1475 Non-dwelling Equipment	0.00	199.00	199.00	0.00
15	1485 Demolition				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary		FFY of Grant: 2010	
PHA Name: Logan Co. M.H.A.	Grant Type and Number Capital Fund Program Grant No: OH16P07250110 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011		<input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input type="checkbox"/> Final Performance and Evaluation Report	
Type of Grant	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Obligated
		Revised²	Expended
Line			
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)	184,528.00	18,453.00
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director <i>P. C. L.</i> Date 07/25/2011		Signature of Public Housing Director <i>OK [Signature]</i> Date 8/17/11	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFF Grants for operations.

⁴ RHF funds shall be included here.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

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¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9(j) of the U.S. Housing Act of 1937, as amended.

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Expires 4/30/2011

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Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 3/31/2014

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: OH16P07250109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval:	
PHA Name: Logan County Metropolitan Housing Authority					
Type of Grant <input checked="" type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input checked="" type="checkbox"/> Revised Annual Statement (revision no:1) <input type="checkbox"/> Final Performance and Evaluation Report	
Summary by Development Account		Total Estimated Cost		Total Actual Cost ¹	
Line	Description	Original	Revised²	Obligated	Expended
1	Total non-CFF Funds				
3	1406 Operations (may not exceed 20% of line 21) ³	18,515.00	55,547.16	55,547.16	32,540.00
4	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	18,515.00	18,514.00	18,514.00	16,892.07
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	5,000.00	7,136.00	7,136.00	3,896.00
10	1460 Dwelling Structures	110,121.00	78,948.01	78,948.01	38,921.68
11	1465.1 Dwelling Equipment—Nonexpendable	3,000.00	10,028.00	10,028.00	2,970.00
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	30,000.00	14,977.83	14,977.83	13,038.63
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

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³ PHAs with under 250 units in management may use 100% of CFF Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary		FFY of Grant: 2009 FFY of Grant Approval:	
PHA Name: Logan County Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: OH16P07250109 Replacement Housing Factor Grant No: Date of CFFP:		
<input type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2011 <input type="checkbox"/> Reserve for Disasters/Emergencies			
Type of Grant	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
Line	Original	Revised²	Obligated
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant: (sum of lines 2 - 19)		
21	Amount of line 20 Related to LBP Activities	185,515.00	185,515.00
22	Amount of line 20 Related to Section 504 Activities		76,892.62
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	Date
			8/17/11

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Part II: Supporting Pages				Federal FFY of Grant: 2009				
PHA Name: Logan County Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH16P07250109 CFPP (Yes/ No): Replacement Housing Factor Grant No:						
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
OH072010104	Operations	1406		18,515.00	55,547.16	55,547.16	32,540.00	On Going
	Administration	1408		18,515.00	18,514.00	18,514.00	16,892.07	On Going
	Seal & Stripe Parking Lot Admin. Build.	1450		5,000.00	3,986.00	3,986.00	3,896.00	In Process
	Replace Roofs	1460		80,000.00	19,896.24	19,896.24	19,896.24	Complete
	Repair/Replace Floors	1460		10,000.00	4,559.98	4,559.98	3,760.22	On Going
	Exterior Painting, as required	1460		8,621.00	3,980.00	3,980.00	3,980.00	On Going
	Replace vinyl siding, gutters, & down- Spouts, as required	1460		10,000.00,	0.00	0.00	0.00	Deferred
	Replace water heaters, as required	1460		1,500.00	7,252.64	7,252.64	0.00	On Going
	Replace stoves and refrig., as required	1465		3,000.00	10,028.00	10,028.00	2,970.00	On Going
	Purchase vehicle	1475		30,000.00	0.00	0.00	0.00	Reclass as 1406
	Kitchen/Bathroom renovations	1460		0.00	37,816.39	37,816.39	6,142.46	On Going
	Replace Interior Doors	1460		0.00	5,442.76	5,442.76	5,142.76	On Going
	Maintenance Tools and Equipment	1475		0.00	13,038.63	13,038.63	0.00	In Process
	Tree Removal	1450		0.00	3,150.00	3,150.00	0.00	In Process
	Computer Upgrade	1475		0.00	1,939.20	1,939.20	0.00	In Process

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

PHA Name: Logan County Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: OH16P07250109 CFFP (Yes/ No): Replacement Housing Factor Grant No:
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Grant Type and Number

Grant Type and Number
Capital Fund Program Grant No: OH16P07250109
CFFP (Yes/ No):
Replacement Housing Factor Grant No:

Federal FFY of Grant: 2009

[illegible]

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

LOGAN COUNTY MEMOROPOLITAN HOUSING AUTHORITY

[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

[illegible]

Page 6

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary		PHA Name: Logan Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH16P07250111 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2011 FFY of Grant Approval:	
Type of Grant		<input checked="" type="checkbox"/> Original Annual Statement <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/Emergencies		<input type="checkbox"/> Revised Annual Statement (revision no:)	
Summary by Development Account		Summary by Development Account		Total Estimated Cost		Total Actual Cost¹	
Line		Original	Revised²	Obligated	Expended		
1	Total non-CFF Funds	0	0	0	0		
2	1406 Operations (may not exceed 20% of line 21) ³	\$49,735	0	0	0		
3	1408 Management Improvements	0	0	0	0		
4	1410 Administration (may not exceed 10% of line 21)	\$15,235	0	0	0		
5	1411 Audit	0	0	0	0		
6	1415 Liquidated Damages	0	0	0	0		
7	1430 Fees and Costs	0	0	0	0		
8	1440 Site Acquisition	0	0	0	0		
9	1450 Site Improvement	\$76,118	0	0	0		
10	1460 Dwelling Structures	\$ 6,500	0	0	0		
11	1465 1 Dwelling Equipment—Nonexpendable	0	0	0	0		
12	1470 Non-dwelling Structures	0	0	0	0		
13	1475 Non-dwelling Equipment	0	0	0	0		
14	1485 Demolition	0	0	0	0		
15	1492 Moving to Work Demonstration	0	0	0	0		
16	1495.1 Relocation Costs	0	0	0	0		
17	1499 Development Activities ⁴	0	0	0	0		

¹ To be completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFF Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary		Grant Type and Number Capital Fund Program Grant No: OH16P07250111 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant:2011 FFY of Grant Approval:	
PHA Name: Logan Metropolitan Housing Auth.					
Type of Grant					
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report			
Summary by Development Account		Total Estimated Cost		Total Actual Cost¹	
Line		Original	Revised²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA	0	0	0	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	0	0	0	0
19	1502 Contingency (may not exceed 8% of line 20)	0	0	0	0
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$152,353	0	0	0
21	Amount of line 20 Related to LBP Activities	0	0	0	0
22	Amount of line 20 Related to Section 504 Activities	0	0	0	0
23	Amount of line 20 Related to Security - Soft Costs	0	0	0	0
24	Amount of line 20 Related to Security - Hard Costs	0	0	0	0
25	Amount of line 20 Related to Energy Conservation Measures	0	0	0	0
Signature of Executive Director		Signature of Public Housing Director		Date	
				10-10-2011	

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U.S. Department of Housing and Urban Development
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U.S. Department of Housing and Urban Development
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U.S. Department of Housing and Urban Development
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U.S. Department of Housing and Urban Development
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ⁱ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

Part I: Summary		FFY of Grant: 2012	
PHA Name: Logan County Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: OH16P07250112 Replacement Housing Factor Grant No: Date of CFP:	FFY of Grant Approval:	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:			
<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)		<input type="checkbox"/> Final Performance and Evaluation Report	
Type of Grant	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
Line		Original	Obligated
1	Total non-CFP Funds		
2	1406 Operations (may not exceed 20% of line 21) ³	\$15,235	
3	1408 Management Improvements		
4	1410 Administration (may not exceed 10% of line 21)	\$15,235	
5	1411 Audit		
6	1415 Liquidated Damages		
7	1430 Fees and Costs		
8	1440 Site Acquisition	\$20,000	
9	1450 Site Improvement	\$98,883	
10	1460 Dwelling Structures	\$ 3,000	
11	1465.1 Dwelling Equipment—Nonexpendable		
12	1470 Non-dwelling Structures		
13	1475 Non-dwelling Equipment		
14	1485 Demolition		
15	1492 Moving to Work Demonstration		
16	1495.1 Relocation Costs		
17	1499 Development Activities ⁴		

¹ To be completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/31/2011

Part I: Summary		FFY of Grant: 2012	
PHA Name: Logan County Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: Oh16j07250112 Replacement Housing Factor Grant No: Date of CFFP:	FFY of Grant Approval:	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report	
Type of Grant	Summary by Development Account	Total Estimated Cost	Total Actual Cost¹
		Original	Obligated
18a	1501 Collateralization or Debt Service paid by the PHA		
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment		
19	1502 Contingency (may not exceed 8% of line 20)		
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$152,353	
21	Amount of line 20 Related to LBP Activities		
22	Amount of line 20 Related to Section 504 Activities		
23	Amount of line 20 Related to Security - Soft Costs		
24	Amount of line 20 Related to Security - Hard Costs		
25	Amount of line 20 Related to Energy Conservation Measures		
Signature of Executive Director		Signature of Public Housing Director	Date

¹ To be completed for the Performance and Evaluation Report.

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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/31/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

U.S. Department of Housing and Urban Development
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Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

[illegible]

form HUD-50075.1 (4/2008)

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 08/31/2011

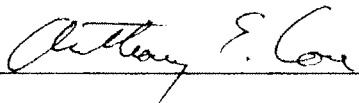
¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

**Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

**Certification by State or Local Official of PHA Plans Consistency with the
Consolidated Plan**

I, Tony Core the President certify that the Five Year and
Annual PHA Plan of the Logan County Metropolitan Housing Authority is consistent with the Consolidated Plan of
Logan County prepared pursuant to 24 CFR Part 91.

 9/29/11

Signed / Dated by Appropriate State or Local Official

Certification for a Drug-Free Workplace

U.S. Department of Housing
and Urban Development

Applicant Name

Logan Metropolitan Housing Authority

Program/Activity Receiving Federal Grant Funding

Low Rent Public Housing & Housing Choice Vouchers

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. **Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

See Attached

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Gail Clark

Title

Executive Director

Signature

Date

X

9-29-2011

Attachment A

Drug Free Workplace

ADMINISTRATIVE ADDRESS: 116 N. EVERETT ST., BELLEFONTAINE
MAINTENANCE BUILDING: 517 GARFIELD AVE, BELLEFONTAINE
PHYLIS McDANIEL COMMUNITY BUILDING: 116 N. EVERETT ST.,
BELLEFONTAINE

UNIT ADDRESS LIST:

1. 104 S. Springhill St., Bellefontaine
2. 108 S. Springhill St., Bellefontaine
3. 112 S. Springhill St., Bellefontaine
4. 116 S. Springhill St., Bellefontaine
5. 118 S. Springhill St., Bellefontaine
6. 120 S. Springhill St., Bellefontaine
7. 105 N. School St., Bellefontaine
8. 109 N. School St., Bellefontaine
9. 113 N. School St., Bellefontaine
10. 409 W. Columbus Ave., Bellefontaine
11. 413 W. Columbus Ave., Bellefontaine
12. 605 W. Columbus Ave., Bellefontaine
13. 1101-A. W. Columbus Ave, Bellefontaine
14. 1101-B W. Columbus Ave, Bellefontaine
15. 537 W. Columbus Ave., Bellefontaine
16. 1103 W. Columbus Ave, Bellefontaine
17. 401-A W. Columbus Ave, Bellefontaine
18. 401-B W. Columbus Ave, Bellefontaine
19. 709 W. Columbus Ave., Bellefontaine
20. 434 W. Chillicothe St., Bellefontaine
21. 436 W. Chillicothe St., Bellefontaine
22. 438 W. Chillicothe St., Bellefontaine
23. 109 Plumvalley St., Bellefontaine
24. 105 Plumvalley St., Bellefontaine
25. 211 Plumvalley St., Bellefontaine
26. 213 Plumvalley St., Bellefontaine
27. 112- A N. Everett St., Bellefontaine
28. 112-B N. Everett St., Bellefontaine
29. 417 Lawrence St., Bellefontaine
30. 313 Lawrence St., Bellefontaine
31. 317 Lawrence St., Bellefontaine
32. 321 Lawrence St., Bellefontaine
33. 328-A Lawrence St., Bellefontaine
34. 328-B Lawrence St., Bellefontaine
35. 413 Lawrence St., Bellefontaine
36. 500 Walker St., Bellefontaine
37. 504 Walker St., Bellefontaine

38. 417 Walker St., Bellefontaine
39. 501 Walker St., Bellefontaine
40. 501-A Albert St., Bellefontaine
41. 501-B Albert St., Bellefontaine
42. 509-A Albert St., Bellefontaine
43. 509-B Albert St., Bellefontaine
44. 513 Albert St., Bellefontaine
45. 517 Albert St., Bellefontaine
46. 521 Albert St., Bellefontaine
47. 525 Albert St., Bellefontaine
48. 621 W. Williams St., Bellefontaine
49. 724 W. Williams St., Bellefontaine
50. 732 W. Williams St., Bellefontaine
51. 320 Walnut St., Bellefontaine
52. 332 Walnut St., Bellefontaine
53. 412 West High St., Bellefontaine
54. 416 West High St., Bellefontaine
55. 729 Euclid St., Bellefontaine
56. 921 Euclid St., Bellefontaine
57. 725-A Euclid St., Bellefontaine
58. 725-B Euclid St., Bellefontaine
59. 812 N. Euclid St., Bellefontaine
60. 600 Charles Ave., Bellefontaine
61. 604 Charles Ave., Bellefontaine
62. 608 Charles Ave., Bellefontaine
63. 612 Charles Ave., Bellefontaine
64. 900 Ohio St, Bellefontaine
65. 904 Ohio St., Bellefontaine
66. 908 Ohio St., Bellefontaine
67. 912 Ohio St., Bellefontaine
68. 703 N. Detroit St., Bellefontaine
69. 717 N. Detroit St, Bellefontaine
70. 328 N. Detroit St., Bellefontaine
71. 537 Cooper St., Bellefontaine
73. 541 Cooper St., Bellefontaine
73. 831 Cooper St., Bellefontaine
74. 835 Cooper St., Bellefontaine
75. 309 Woodview Dr., Bellefontaine
76. 404 Woodview Dr., Bellefontaine
77. 405 Woodview Dr., Bellefontaine
78. 408 Woodview Dr., Bellefontaine
79. 409 Woodview Dr, Bellefontaine
80. 412 Woodview Dr., Bellefontaine
81. 413 Woodview Dr., Bellefontaine
82. 501 Woodview Dr., Bellefontaine
83. 505 Woodview Dr., Bellefontaine

84. 620 Humble Dr., DeGraff
85. 608 Humble Dr, DeGraff
86. 632 Humble Dr., DeGraff
87. 644 Humble Dr., DeGraff
88. 656 Humble Dr., DeGraff
89. 108 New St., Quincy
90. 220 Jefferson St, Quincy
91. 222 Jefferson St, Quincy
92. 224 Jefferson St, Quincy
93. 226 Jefferson St, Quincy
94. 228 Jefferson St, Quincy
95. 230 Jefferson St, Quincy
96. 232 Jefferson St., Quincy
97. 218 Jefferson St, Quincy,
98. 204 Colton Ave, Bellefontaine
99. 504 Woodview Dr, Bellefontaine
100. 500 Woodview Dr, Bellefontaine

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

Approved by OMB
0348-0046

1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance		2. Status of Federal Action: <input checked="" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award		3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year <u>2012</u> quarter _____ date of last report <u>2011</u>	
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Logan Metropolitan Housing Auth. 116 N. Everett St. Bellefontaine, OH 43311 Congressional District, if known: 4c			5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:		
6. Federal Department/Agency: Department of Housing and Urban Development			7. Federal Program Name/Description: Oh072010104 CFDA Number, if applicable: _____		
8. Federal Action Number, if known:			9. Award Amount, if known: \$		
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI):			b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI):		
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.			Signature: <u>[Signature]</u> Print Name: <u>Gail Clark</u> Title: <u>Executive Director</u> Telephone No.: <u>937-599-1845</u> Date: <u>9-28-2011</u>		
Federal Use Only:				Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)	

**DISCLOSURE OF LOBBYING ACTIVITIES
CONTINUATION SHEET**

Approved by OMB
0348-0046

Reporting Entity: Logan Metropolitan Housing Auth. Page 1 of 1

Request for Release of Funds and Certification

U.S. Department of Housing
and Urban Development
Office of Community Planning
and Development

OMB No. 2506-0087
(exp. 3/31/2011)

This form is to be used by Responsible Entities and Recipients (as defined in 24 CFR 58.2) when requesting the release of funds, and requesting the authority to use such funds, for HUD programs identified by statutes that provide for the assumption of the environmental review responsibility by units of general local government and States. Public reporting burden for this collection of information is estimated to average 36 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

Part 1. Program Description and Request for Release of Funds (to be completed by Responsible Entity)

1. Program Title(s) Low Rent Public Housing	2. HUD/State Identification Number OH072010104	3. Recipient Identification Number (optional)
4. OMB Catalog Number(s)	5. Name and address of responsible entity City of Bellefontaine 135 N. Detroit St, Bellefontaine, OH 43311	
6. For information about this request, contact (name & phone number) Gail Clark, 937-599-1845	7. Name and address of recipient (if different than responsible entity) Logan County Metropolitan Housing Authority 116 N. Everett St, Bellefontaine, OH 43311	
8. HUD or State Agency and office unit to receive request Cleveland HUD Office 1350 Euclid Ave, Suite 500 Cleveland, OH 44115-1815		

The recipient(s) of assistance under the program(s) listed above requests the release of funds and removal of environmental grant conditions governing the use of the assistance for the following

9. Program Activity(ies)/Project Name(s) Public Housing Modernization	10. Location (Street address, city, county, State) See attached address listing.
---	--

11. Program Activity/Project Description
Capital Fund, Grant Years 2011 - 2015

**Floor Renovations
Bathroom Renovations
Exterior Renovations
Water Heaters
Appliances
Mail Receptacles
Catastrophic Renovations
Handrail & Light Fixtures
Maintenance Facility
Parking Lot
Computer Upgrades
Security Upgrades**

Part 2. Environmental Certification (to be completed by responsible entity)

With reference to the above Program Activity(ies)/Project(s), I, the undersigned officer of the responsible entity, certify that:

1. The responsible entity has fully carried out its responsibilities for environmental review, decision-making and action pertaining to the project(s) named above.
2. The responsible entity has assumed responsibility for and complied with and will continue to comply with, the National Environmental Policy Act of 1969, as amended, and the environmental procedures, permit requirements and statutory obligations of the laws cited in 24 CFR 58.5; and also agrees to comply with the authorities in 24 CFR 58.6 and applicable State and local laws.
3. After considering the type and degree of environmental effects identified by the environmental review completed for the proposed project described in Part 1 of this request, I have found that the proposal ☐ did ☒ did not require the preparation and dissemination of an environmental impact statement.
4. The responsible entity has disseminated and/or published in the manner prescribed by 24 CFR 58.43 and 58.55 a notice to the public in accordance with 24 CFR 58.70 and as evidenced by the attached copy (copies) or evidence of posting and mailing procedure.
5. The dates for all statutory and regulatory time periods for review, comment or other action are in compliance with procedures and requirements of 24 CFR Part 58.
6. In accordance with 24 CFR 58.71(b), the responsible entity will advise the recipient (if different from the responsible entity) of any special environmental conditions that must be adhered to in carrying out the project.

As the duly designated certifying official of the responsible entity, I also certify that:

7. I am authorized to and do consent to assume the status of Federal official under the National Environmental Policy Act of 1969 and each provision of law designated in the 24 CFR 58.5 list of NEPA-related authorities insofar as the provisions of these laws apply to the HUD responsibilities for environmental review, decision-making and action that have been assumed by the responsible entity.
8. I am authorized to and do accept, on behalf of the recipient personally, the jurisdiction of the Federal courts for the enforcement of all these responsibilities, in my capacity as certifying officer of the responsible entity.

Signature of Certifying Officer of the Responsible Entity

x *Adam M. Brannon*

Address of Certifying Officer

135 N. Detroit St.
Bellefontaine, OH 43311

Title of Certifying Officer

Mayor, City of Bellefontaine

Date signed

9/29/11

Part 3. To be completed when the Recipient is not the Responsible Entity

The recipient requests the release of funds for the programs and activities identified in Part 1 and agrees to abide by the special conditions, procedures and requirements of the environmental review and to advise the responsible entity of any proposed change in the scope of the project or any change in environmental conditions in accordance with 24 CFR 58.71(b).

Signature of Authorized Officer of the Recipient

x *[Signature]*

Title of Authorized Officer

Executive Director

Date signed

9-29-2011

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Form: 7015.15

ADMINISTRATIVE ADDRESS: 116 N. EVERETT ST., BELLEFONTAINE

MAINTENANCE BUILDING: 517 GARFIELD AVE, BELLEFONTAINE

PHYLIS McDANIEL COMMUNITY BUILDING: 116 N. EVERETT ST.,
BELLEFONTAINE

UNIT ADDRESS LIST:

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44. 513 Albert St., Bellefontaine
45. 517 Albert St., Bellefontaine
46. 521 Albert St., Bellefontaine
47. 525 Albert St., Bellefontaine
48. 621 W. Williams St., Bellefontaine
49. 724 W. Williams St., Bellefontaine
50. 732 W. Williams St., Bellefontaine
51. 320 Walnut St., Bellefontaine
52. 332 Walnut St., Bellefontaine
53. 412 West High St., Bellefontaine
54. 416 West High St., Bellefontaine
55. 729 Euclid St., Bellefontaine
56. 921 Euclid St., Bellefontaine
57. 725-A Euclid St., Bellefontaine
58. 725-B Euclid St., Bellefontaine
59. 812 N. Euclid St., Bellefontaine
60. 600 Charles Ave., Bellefontaine
61. 604 Charles Ave., Bellefontaine
62. 608 Charles Ave., Bellefontaine
63. 612 Charles Ave., Bellefontaine
64. 900 Ohio St, Bellefontaine
65. 904 Ohio St., Bellefontaine
66. 908 Ohio St., Bellefontaine
67. 912 Ohio St., Bellefontaine
68. 703 N. Detroit St., Bellefontaine
69. 717 N. Detroit St, Bellefontaine
70. 328 N. Detroit St., Bellefontaine
71. 537 Cooper St., Bellefontaine
73. 541 Cooper St., Bellefontaine
73. 831 Cooper St., Bellefontaine
74. 835 Cooper St., Bellefontaine
75. 309 Woodview Dr., Bellefontaine
76. 404 Woodview Dr., Bellefontaine
77. 405 Woodview Dr., Bellefontaine
78. 408 Woodview Dr., Bellefontaine
79. 409 Woodview Dr, Bellefontaine
80. 412 Woodview Dr., Bellefontaine
81. 413 Woodview Dr., Bellefontaine
82. 501 Woodview Dr., Bellefontaine
83. 505 Woodview Dr., Bellefontaine
84. 620 Humble Dr., DeGraff

85. 608 Humble Dr, DeGraff
86. 632 Humble Dr., DeGraff
87. 644 Humble Dr., DeGraff
88. 656 Humble Dr., DeGraff
89. 108 New St., Quincy
90. 220 Jefferson St, Quincy
91. 222 Jefferson St, Quincy
92. 224 Jefferson St, Quincy
93. 226 Jefferson St, Quincy
94. 228 Jefferson St, Quincy
95. 230 Jefferson St, Quincy
96. 232 Jefferson St., Quincy
97. 218 Jefferson St, Quincy,
98. 204 Colton Ave, Bellefontaine
99. 504 Woodview Dr, Bellefontaine
100. 500 Woodview Dr, Bellefontaine

Resolution No. 8-11

**PHA Certifications of Compliance
with PHA Plans and Related
Regulations**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the 5-Year and/or ☒ Annual PHA Plan for the PHA fiscal year beginning 1/1/2012, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.

13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

Logan Metropolitan Housing Authority

OH072010104

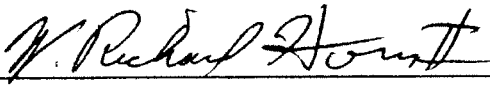
PHA Name

PHA Number/HA Code

5-Year PHA Plan for Fiscal Years 20__ - 20__

xx Annual PHA Plan for Fiscal Years 20¹² - 20¹²

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012, 31 U.S.C. 3729, 3802)

Name of Authorized Official	Title
Richard Horn	Board Chairman
Signature	Date
	9/28/11

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Applicant Name

Logan Metropolitan Housing Authority

Program/Activity Receiving Federal Grant Funding

Low Rent Public Housing

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Gail Clark

Title

Executive Director

Signature

Date (mm/dd/yyyy)

09-29-2011

Previous edition is obsolete

form HUD 50071 (3/98)
ref. Handbooks 7417.1, 7475.13, 7485.1, & 7485.3

Physical Needs Assessment

Comprehensive Grant Program (CGP)

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157
(exp. 1/31/2014)

HA Name Logan Metropolitan Housing Authority				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
Development Number OH072010104		Development Name Not Named (Scattered Sites)		DOFA Date or Construction Date 06-01-1991	
Development Type		Occupancy Type		Structure Type	
Rental <input checked="" type="checkbox"/> Turnkey III - Vacant <input type="checkbox"/> Turnkey III - Occupied <input type="checkbox"/> Mutual Help <input type="checkbox"/> Section 23, Bond Financed <input type="checkbox"/>		Family <input checked="" type="checkbox"/> Elderly <input type="checkbox"/> Mixed <input type="checkbox"/>		Detached/Semi-Detached <input checked="" type="checkbox"/> Row <input type="checkbox"/> Walk-Up <input type="checkbox"/> Elevator <input type="checkbox"/>	
				Number of Buildings 86 Current Bedroom Distribution 0 _____ 1 _____ 2 _____ 3 <u>65</u> 4 <u>35</u> 5 _____ 5+ _____	
				Number of Vacant Units 2 Total Current Units 100 Urgency of Need (1-5)	
General Description of Needed Physical Improvements					
Dwelling unit Physical Improvements					
Flooring					
Water Heaters					
Exterior renovations					
Appliances					
Bathrooms					
HVAC					
Exterior Door replacement					
Light Fixtures & Handrails					
Total Preliminary Estimated Hard Cost for Needed Physical Improvements				\$ 753,525.00	
Per Unit Hard Cost				\$ 7,315.00	
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Development Has Long-Term Physical and Social Viability				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Date Assessment Prepared					
Source(s) of Information					
Local costs and construction costs were used.					
Materials and equipment cost were obtained from lumber and hardware stores.					

Physical Needs Assessment

Comprehensive Grant Program (CGP)

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157
(exp. 1/31/2014)

HA Name Logan Metropolitan Housing Authority				<input checked="" type="checkbox"/> Original <input type="checkbox"/> Revision Number _____	
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		Number of Buildings 86		Number of Vacant Units 2	
		Current Bedroom Distribution 0 _____ 1 _____ 2 _____ 3 65 4 35 5 _____ 5+ _____		Total Current Units 100	
General Description of Needed Physical Improvements					Urgency of Need (1-5)
Maintenance facility					1
Parking Lot					2
Administrative building renovations					5
Community building renovations					5
Computer Hardware Upgrade					2
Maintenance Equipment					2
Total Preliminary Estimated Hard Cost for Needed Physical Improvements				\$	753,525.00
Per Unit Hard Cost				\$	7,315.00
Physical Improvements Will Result in Structural/System Soundness at a Reasonable Cost				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Development Has Long-Term Physical and Social Viability				Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Date Assessment Prepared					
Source(s) of Information Local costs and construction costs were used. Materials and equipment cost were obtained from lumber and hardware stores.					

Authority to Use Grant Funds

U.S. Department of Housing
and Urban Development
Office of Community Planning
and Development

To: (name & address of Grant Recipient & name & title of Chief Executive Officer)		Copy To: (name & address of SubRecipient)
Logan Metropolitan Housing Authority 116 N. Everett St. Bellefontaine, OH 43311		City of Bellefontaine 135 North Detroit Street Bellefontaine, OH 43311
We received your Request for Release of Funds and Certification, form HUD-7015.15 on		
Your Request was for HUD/State Identification Number		OH072

All objections, if received, have been considered. And the minimum waiting period has transpired.
You are hereby authorized to use funds provided to you under the above HUD/State Identification Number.
File this form for proper record keeping, audit, and inspection purposes.

CAPITAL FUNDS 2012 - 2016
Appliances
HVAC
Flooring
Water Heaters
Exterior renovations
Exterior Door Replacement
Light Fixtures & Handrails
Maintenance Facility
Parking Lot
Administrative building renovations
Community building renovations
Computer Hardware Upgrade
Maintenance Equipment

Typed Name of Authorizing Officer	Signature of Authorizing Officer	Date (mm/dd/yyyy)
Title of Authorizing Officer	X	
Director, Office of Public Housing		

Previous editions are obsolete.

form HUD-7015.16 (2/94)
ref. Handbook 6513.01